

DWRF Funding Cycle 2004 Priority List Application

Side 1 of 2 (Use Separate Form for Each Project)

Application # DW - _ _ _ - 2004 (WIFA use only)

SECTION 1: APPLICANT INFORMATION

- 1.1 Applicant: _____ Contact: _____
- 1.2 Address: _____
- 1.3 Phone #: _____ FAX #: _____
- 1.4 County in Which Project is Located: _____
- 1.5 Number of Benefiting Connections: _____ Population Served by the System: _____
- 1.6 Average Monthly User Fees/Charges (*base & use*) for an Average Residential User: \$ _____
- 1.7 Total Debt (*Principal Only*) Payable by System Users: \$ _____
- 1.8 ADEQ System Identification Number: _____

SECTION 2: PROJECT DESCRIPTION

- 2.1 Project Title/Name: _____
- 2.2 Briefly summarize the reason for the proposed project and/or attach a summary: (*Include conditions initiating the proposed project and give details regarding any Notice of Violation(s) and/or Consent Order from a regulating agency. Attach copy.*)

2.3 Project Description

a. Facilities (*Check appropriate boxes*)

| | Repair | Rehab | Upgrade | Replace | Expand |
|------------------------------|--------|-------|---------|---------|--------|
| Well or Spring Box | | | | | |
| Storage | | | | | |
| Distribution & Booster Pumps | | | | | |
| Treatment & Disinfection | | | | | |

b. Secure a New Water Source (*Check appropriate box*)

- ☐ Ground Water ☐ Surface Water ☐ Ground Water under Direct Surface Influence

2.4 Type of Loan required during funding cycle 2004 (*check appropriate box*)

- ☐ Design ☐ Construction

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2.5 Consolidation and Regionalization *(Check appropriate boxes)*

- | | |
|---|---|
| <input type="checkbox"/> Consolidate Existing Physical Facilities | <input type="checkbox"/> Consolidate Existing Service Areas |
| <input type="checkbox"/> Consolidate Existing Operations | <input type="checkbox"/> Consolidate Existing Ownerships |

SECTION 3: AMOUNT OF FINANCIAL ASSISTANCE

| <u>Total Project Costs</u> | <u>Amount Requested from WIFA</u> | <u>Amount Funded Locally</u> | <u>Amount Funded from Other Sources</u> |
|----------------------------|---------------------------------------|----------------------------------|---|
| \$ | = \$ | + \$ | + \$ |

List Names of Other Funding Sources:

SECTION 4: READINESS TO PROCEED INDICATORS

4.1 Debt Authorization *(Authorization through election or special district creation or process.) (Check appropriate box):*

- ☐ Authorized – Enclose copy of official election canvas or special district proceedings.
- ☐ Scheduled – Anticipated Election or Authorization Date *(insert date):*
- ☐ No Plans to Schedule within Funding Cycle – January 2004 through December 2004.

4.2 Project Plans & Specifications: *(Check appropriate box)*

- ☐ Approved – Enclose Approval Notification.
- ☐ Scheduled for Approval – Anticipated Approval Date *(insert date):*
- ☐ Engineer Selected – Anticipated Start Date
- ☐ Engineer Not Selected

4.3 Applicable Local, State, and Federal Project Permits: *(Check appropriate box)*

- ☐ Obtained – Enclose Approval Notification(s).
- ☐ Scheduled to Obtain Permit(s) – Anticipated Permit(s) Date *(insert date):*
- ☐ Date of Approval Unknown
- ☐ Not Applicable – Explain:

4.4 Project Bids: *(Check appropriate box)*

- ☐ Accepted
- ☐ Scheduled to Solicit Bids – Anticipated Solicitation Date *(insert date):*
- ☐ Date of Bid Solicitation Unknown
- ☐ Not Applicable – Explain:

SECTION 5: CERTIFICATION & APPROVAL

As the Authorized Representative, I certify that the information contained in this application is, to the best of my knowledge, true, accurate, and correct.

Signature:

Name:

Title:

Date: